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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/574,333			ing Date 21/2008	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛				HER THAN ALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A	N/A		N/A		N/A			N/A			
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A	N/A		N/A		N/A			N/A			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A			
TOTAL CLAIMS (37 CFR 1.16(i))			m	minus 20 =		*		X \$ =		OR	X \$ =			
INDEPENDENT CLAIMS (37 CFR 1.16(h))			r	minus 3 =		*		X \$ =			X \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	E FEE ;	sheets of par s \$250 (\$125 additional 50	er, the a for sma sheets o	pplication Il entity) r fraction	gs exceed 100 n size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))														
* If the difference in column 1 is less than zero, enter "0" in column 2.											TOTAL			
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)									SMALL ENTITY OF			OTHER THAN SMALL ENTITY		
AMENDMENT	06/02/2011	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	* 8	Minus	** 20		= 0		X \$26 =	0	OR	X \$ =			
	Independent (37 CFR 1.16(h))	* 1	Minus	***3		= 0		X \$110 =	0	OR	X \$ =			
	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
1ENDMENT		CLAIMS REMAINII AFTER AMENDME	NG !	NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	*	Minus	**		=		X \$ =		OR	X \$ =			
	Independent (37 CFR 1.16(h))	*	Minus	***		=		X \$ =		OR	X \$ =			
	Application Size Fee (37 CFR 1.16(s))													
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
							• !	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
** If *** I	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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